

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>AS</i>		07/19/00
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	<i>ALN</i>	49	7/22/00
RESPONSE FORMALITY REVIEW		831	08/28/00

INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral)... Canceled  
 + ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Final	Original	Date
1	✓	✓	07/19/00
2	✓	✓	07/19/00
3	✓	✓	07/19/00
4	✓	✓	07/19/00
5	✓	✓	07/19/00
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If more than 150 claims or 10 actions  
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